



Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

E-License System User Access Code Request

Date: _____

Owner/Licensee Name: _____

Arizona Liquor License Number(s), if applicable: _____

Legal Entity Name: _____

Legal Entity Address: _____

I request the access code for this entity be sent to the following email address (physical addresses prohibited).

Email Address: _____

Initial each of the following statements (required):

_____ I understand the access code is to be treated as confidential as it is the electronic key that connects a system user with the code to all business records associated with the legal entity listed above.

_____ I understand I am only able to request access codes to a legal entity I own or am the licensee of record with the Arizona Department of Liquor.

_____ I understand misuse of an access code for personal benefit or to harm another may be construed as a criminal act subject to prosecution, and the access code is to be used as a State of Arizona Government web-based tool for official business only.

_____ I understand it is my responsibility, if I employ an agent or compliance company to engage in business with the Department of Liquor on behalf of my company, that I will first file an agent amendment with the agency (See Arizona State Revised Statute § 4-202.A).

Return notarized document to Answers@AzLiquor.gov or above address

***Note to notary:** please confirm name on ID conforms with owner/licensee name at the top of this form.

I (Print Full Name) _____ affirm that I am the owner/licensee of a legal entity on record with the Arizona Department of Liquor Licenses and Control and I am requesting the e-license system access code to that legal entity. (Signature) _____

Signature: _____ State of _____ County of _____
The foregoing instrument was acknowledged before me this

My Commission Expires on: _____ Date _____ Day _____ Month _____ Year _____